DOCUMENT RESUME

ED 357 871 PS 021 403

AUTHOR Gaudin, James M., Jr.
TITLE Family Structure and Dynamics in Neglectful Families: Implications for Intervention.
SPONS AGENCY National Center on Child Abuse and Neglect (DHHS/OHDS), Washington, D.C.
PUB DATE Mar 93
CONTRACT DHHS-CA-1900
NOTE 30p.; Paper presented at the Biennial Meeting of the Society for Research in Child Development (60th, New Orleans, LA, March 25-28, 1993).
PUB TYPE Reports - Research/Technical (143) -- Speeches/Conference Papers (150)

EDRS PRICE MF01/PC02 Plus Postage.
DESCRIPTORS *Child Neglect; Comparative Analysis; Early Intervention; Economically Disadvantaged; *Family Characteristics; Family Environment; Family Problems; *Family Structure; *Low Income Groups; One Parent Family; *Parent Child Relationship
IDENTIFIERS *Family Intervention

ABSTRACT

To identify remedial and preventive interventions that target dysfunctional processes in the family, this study compared the structure and processes of neglectful and non-neglectful families. A sample of 102 neglectful families was identified and recruited from the caseloads of protective service workers in Georgia. A comparison group of 103 predominantly single parent families of low socioeconomic status was recruited from Aid to Families with Dependent Children employment preparation programs and from Head Start programs. Data were obtained from three sources: (1) caseworkers familiar with families in the sample and trained to use the measurement instruments; (2) trained interviewers who conducted in-home interviews; and (3) trained videotape raters who rated videotaped family interventions for 91 neglectful families and 95 comparison group families. Results indicated that caseworkers viewed the neglectful families as less healthy, less able to resolve conflicts, less cohesive, dramatically less well led, and less verbally expressive than the comparison group families. Neglectful families were rated as demonstrating more marked dominance in family leadership, less psychological closeness and cohesion, poorer negotiating skills, more vagueness in verbal expression, less willingness to assume responsibility for their actions, and less empathy toward one another than comparison group families. Implications of these findings for intervention are discussed. (MM)

**********
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
**********

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)
X This document has been reproduced as received from the person or organization originating it.
☐ Minor changes have been made to improve reproduction quality.
• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

ED357871

# Family Structure and Dynamics in Neglectful Families:

# Implications for Intervention

James M. Gaudin, Jr., Ph.D., Director Research Center

The University of Georgia

School of Social Work

Athens, Georgia 30602

PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY
James M. Gaudin, Jr.
TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

This research is supported by Grant No CA 1900 from the U.S. Department of Health and Human Services, National Center on Child Abuse and Neglect.

PS 021403

The existing research has revealed a number of structural elements that characterize neglectful families. They are likely to be extremely poor, predominantly single parent families, that have more children than other similarly situated non-neglectful families (Polansky, et al, 1981; Polansky, Gaudin, Ammons, and Davis, 1985). Observations of the parent-child interactional patterns in neglectful families in one study indicate that there were significantly less parent-child interactions, more negative interactions, and less positive interactions than abusive and neglectful families (Burgess and Conger, 1978). The children treated their mothers no differently than the controls, but had significantly less positive physical and verbal contacts with their fathers. The neglectful fathers had very low rates of positive responses to their children and failure to comply with their children's request of them. These patterns were confirmed in studies by Bousha and Twentyman (1984). Neglecting mothers have been found to be more critical, more directive, and less able than controls to provide positive attention to their child's play activity (Aragona and Eyberg, 1981). In a study of discrete behaviors in neglectful families, deficits in parental knowledge and skills and motivation were found, but no evidence of child-related factors that cause neglect (Herrenkohl, Herrenkohl, and Egolf, 1983).

These previous studies provide us with some understanding of parent personality factors, parent-child interactions, and the families' linkages with external informal support networks. There is little information about the unique patterns of family interaction that differentiate neglectful families from other families in similar life circumstances.

Although neglectful families are predominantly economically impoverished, most poor families do not neglect their children. Is there anything unique about how neglectful families communicate, cope with stress, problem solve, allocate power, define roles. handle conflict, express feelings, and seek to access external resources that is distinctive and provides direction

for intervention? The purpose of this study was to examine and compare the structure and processes in neglectful and similarly situated non-neglectful families for the purpose of identifying points for remedial and preventive interventions that target the dysfunctional processes in the family system.

It was hoped that an examination of the family interactions in neglectful families would produce data to develop typologies that would enhance our ability to assess, diagnose, and intervene effectively in neglectful family systems. If significant differences in family dynamics could be identified that distinguish neglectful families from similarly situated families who do not neglect, family interventions could be more focused and more effective in improving the quality of care in these families.

It was anticipated that the identification of differences in family structure and functioning between neglecting and non-neglecting families would aid in the development of appropriate neglecting family typologies that will bear directly on assessment, diagnosis and intervention approaches with these families. An expected result of this investigation was to determine the nature of differences between neglecting and non-neglecting family patterns or combinations of patterns regarding family composition, communication, power structure, roles and boundaries, conflict resolution, problem solving, expression of affect, degree of isolation and the ability to access community resources. This is intended to have significant implications for more accurate assessments and diagnosis that may then be of primary importance in directing the practitioner in the utilization of family treatment modalities most suited to altering or alleviating dysfunctional relationships or patterns in these families.

The interactions of these neglecting families may be significantly influenced by the presence or absence of male figures in the households, and the role tasks they carry out.

Knowledge of the roles that males play in neglectful families can provide direction for engaging males in interactions. The research also provided important data on the impact of substance abuse on the family's ability to parent.

## Research Methods

### Sampling

Neglectful families were identified and recruited from the caseloads of protective service workers in four urban and three rural Georgia counties. The families had all been reported for child neglect, and the neglect verified upon investigation. Neglect was identified as the primary problem, but eleven families with some physical abuse as well as neglect were included. All families chosen had at least one child living in the home, no known incest, were well known to a caseworker, and were willing to participate.

A control group of similarly low SES, predominantly single parent families were recruited from AFDC employment preparation programs and a few from Head Start programs in the seven counties. All were known to a caseworker, contained a child between the ages 5 and 17, were known not to be neglectful and were willing to participate. The control sample was deliberately matched with the neglect sample on -- in order of importance -- income, single parent status, and race. The samples turned to be closely matched on a number of other variables as well, although these were not purposely manipulated by the researchers. Each neglect and control family was given $50.00 for participation in the study.

To verify that the samples did in fact vary significantly in the calibre of child care, caseworkers were asked to complete the Child Well-Being Scales (Magura and Moses, 1986). There were statistically significant differences on this measure, (Gaudin, Polansky and

Kilpatrick, 1992). However, we had few instances of severe neglect; our families were typically involved in moderate neglect at the time they were interviewed for the study.

The study sample included 102 neglect and 103 control families from whom complete data were obtained. However, videotapes of useable quality and subsequent ratings were collected from 92 neglect and 95 control families.

Sample Characteristics

Of the primary care providers in the study, all but two were women, and 95 % in both samples were the children's natural mothers. Both the neglect and control samples were 65% African-American. Over two thirds of both groups were living on AFDC (68.5% of neglect vs. 73.9% of controls), and 81% of the neglect and 83% of the controls had total family incomes under $10,000 per year. Sixty seven percent of the neglect families were single-parent as were 75% of the controls. Mother's age was not deliberately controlled, but the averages were very similar -- 32.6 vs. 30.4 years. Significant differences were identified between the two groups on only two demographic factors. The Neglect families averaged more children per household (3.24 vs. 2.51; $p = .001$ by t-test), and the neglectful primary care provider averaged fewer school grades completed (9.9 vs. 12.0; $p = .0001$ by t-test).

Data Collection/Measures

Data were obtained from three sources: (1) caseworkers in the agencies who were familiar with the families in the sample, and were trained to use the measurement instruments, (2) trained interviewers consisting of experienced practitioners and graduate students who conducted in-home interviews, and (3) trained videotape raters, who were experienced practitioners as well as social work doctoral students.

First, caseworkers familiar with each family provided data from case records, as well as ratings of problems observed, child care (Child Well Being Scales, Magura and Moses, 1986) using Polansky's Maternal Characteristics Scale (1981) and ratings of family functioning using an adapted version of the Beavers Self-Report Family Inventory (1988) renamed the Family Evaluation Measure (FEM). Next, each family was also interviewed in their own home by a research worker, who interviewed the mother, the father-equivalent if available, and an adolescent child, if there were one.

Interviewers administered the following instruments to the primary care provider in each family:

Self-Report Family Inventory (Beavers, Hampson, & Hulgus, 1988) - Family members' self-report of family functioning. (administered to all family members age 12 and over)

Family of Origin Measure - information on developmental experiences of primary care providers & partners;

The Generalized Contentment Scale (Hudson, 1982) - a measure of depression administered to primary care provider.

Loneliness Scale (Russell, Peplau, & Cutrona, 1990)

Full-Time Male Form or Part-time Male Form - information on role performance of adult males in family;

Social Network Assessment Instrument (Gaudin, 1990); - a measure of informal social supports;

Finally, the interviewer also conducted an in-home session for all family members which was videotaped for later coding on the Georgia Family Q-Sort (Wampler, Halverson, Moore &

Walters, 1989) and the Beavers Family Competence and Family Style scales (Beavers, Hulgus, and Hampson, 1988). All resident household members participated in the session including, when available, adult males who filled spousal and/or parental roles for a significant portion of the week. The family, as a unit, was given three five-minute tasks: (a) to choose and plan an outing or other enjoyable family activity they would do together; (b) to select a problem they frequently face (doing chores, homework, rules about bedtime) and arrive at a mutual solution; (3) to work together to construct something using a set of Tinker Toys. Other than to focus the camera, and to introduce the tasks at timed intervals, the interviewer remained out of the family process.

The videotaped family interactions were rated by raters who were systematically trained and oriented to use the three observational instruments. The two raters were social work doctoral students who were experienced in working with families. Each rater received more than 48 hours of training in the use of the instruments. Operational definitions of terms were clarified and videotapes were rated independently by the two raters until inter-rater reliabilities reached 85-95%. Cases were usually rated by only one rater. However, randomly selected cases were rated by both as an ongoing check for reliability.

Intercoder reliabilities on these measures were tested on a total of 16 tapes, each scored independently using the ANOVA reliability estimate (Winer, 1972, pp. 283-99). For the Beavers Family Competence measure, the range was .72 to .91 for the 12 subscales, with .90 for the total scale; and .87 for the Global Family Health/Pathology scale. On the Beavers Family Style scales the range was .66 to .90; overall .82, and .68 for the Global Style scale.

# RESULTS

## Self-Report Measures

The Self-Report Family Inventory (SFI) was used to obtain an internal view of family functioning. Five dimensions of family functioning are derived from subsets of the 34 statements in the Self-Report Inventory: health, conflict resolution, family cohesion, directive leadership, and expressiveness. Lower scores indicate more healthy, competent family functioning. Data are available from 103 neglect primary care providers, and from 102 controls, with the exception of items with missing data.

Self reports from the neglectful primary care providers differed significantly but not substantially from control care provider reports on only two of the five computed dimensions of functioning: conflict and expressiveness . The neglect families reported themselves as having more unresolved family conflict, and less open and expressive of positive feelings within the family. On two other indices, health/competence and directive leadership, differences may be termed "trends." The slightly higher means indicate somewhat less healthy, competent functioning and less clear leadership. On average, the neglect mothers reported their families as no less cohesive than did the control mothers.

Hudson's Generalized Contentment Scale (1982) was administered to principal care providers in the families as our measures of depression. The measure has well-established reliability and validity with a wide variety of populations. With our sample the Alpha was .88. It correlates highly with scores on the widely used Beck Depression scale (Hudson and Proctor, 1977). Total scores above 30 on this norm-referenced scale indicate a "clinically significant problem with depression". As indicated in Table 1, responses from 59% of the neglectful

principal care providers indicated significant depression; whereas only 35% of the care providers in the control families reported significant symptoms of depression.

TABLE 1
GENERALIZED CONTENTMENT SCALE SCORES
FOR NEGLECT/CONTROL FAMILIES

CONTENTMENT SCALE CATEGORIES

| | <30 | | 30-50 | | >50 | |
|---|---|---|---|---|---|---|
| | N | % | N | % | N | % |
| Neglect (N=88) | 36 | 40.9 | 35 | 39.8 | 17 | 19.3 |
| Control (N=83) | 53 | 63.9 | 26 | 31.3 | 4 | 4.8 |

$X^2 = 12.5$, DF = 2
DF = 2
P = .002

Caseworker Assessments

Sampling was limited to families who had been active long enough to be familiar to their caseworkers. We imposed this condition so that we would have ratings of family functioning by an external observer of family functioning over a longer period of time - an "outsiders' view". The Self-Report Family Inventory was only slightly modified by changing personal pronouns to render the measure easier to use by an outside observer. The resulting instrument was labelled the Family Evaluation Measure (FEM). Data are available from caseworkers or Head Start workers for the 103 neglect and 102 control families.

Table 2
Neglect vs. Control Differences on the Five Dimensions
of the Family Evaluation Measure

| | Neglect | | Control | | | |
|---|---|---|---|---|---|---|
| Dimensions | Mean | SD | Mean | SD | t | p |
| Health | 3.01 | .63 | 2.05 | .44 | 12.5 | .0001 |
| Conflict | 2.85 | .75 | 1.93 | .48 | 10.5 | .0001 |
| Cohesion | 2.84 | .75 | 2.34 | .52 | 5.3 | .0001 |
| Dir Leadership | 2.99 | 1.02 | 1.81 | .69 | 9.8 | .0001 |
| Expressiveness | 2.89 | .73 | .73 | .52 | 12.4 | .0001 |

The FEM yields five composite scores, or dimensions of family functioning. Mean differences were statistically significant on all five of the dimensions, favoring the control families. While the primary caretakers in the neglect families report that their households function somewhat less competently than the control families, the caseworkers clearly view the neglectful families as: less healthy; less able to resolve conflicts; less cohesive; dramatically less well led; and less verbally expressive (see Table 2). These differences are all reminiscent of Minuchin and colleagues' descriptions of poorly functioning families (Minuchin, Montalvo, Guerney, Rosman, and Schumer, 1962).

Ratings of Videotaped Family Interventions

Beavers Family Competence ratings were completed for 91 neglect and 95 controls. Eleven neglect and 8 control families were not videotaped because they included only single parents and children under age 5. Such units provided insufficient family interactions for rating.

One of the 12 Family Competence scales, Family Mythology, was eliminated from our instrument because the 15-20 minute videotaped family interactions provided insufficient interactions for rating the family on this scale. Another item, the Parental Coalitions scale, was not applicable to our sample of predominantly single-parent households.

Table 3
Comparison of Neglect with Control
Means on the Beavers Family Competence Scales

| | Neglect | | Control | | | |
|---|---|---|---|---|---|---|
| Scale | Mean | S.D. | Mean | S.D. | t | p |
| Overt Power | 2.87 | 1.14 | 3.56 | .89 | 4.59 | .0001 |
| Closeness | 3.15 | .99 | 3.79 | .77 | 4.93 | .0001 |
| Goal-directed negotiation | 2.96 | 1.00 | 2.48 | .83 | 3.57 | .0005 |
| Clarity of expression | 2.66 | .92 | 2.17 | .68 | 4.14 | .0001 |
| Responsibility | 2.87 | .81 | 2.54 | .73 | 2.93 | .0039 |
| Permeability | 2.62 | .69 | 2.34 | .62 | 2.91 | .0041 |
| Range of feelings | 2.64 | .71 | 2.45 | .64 | 1.95 | .0528 |
| Mood and tone | 2.05 | .71 | 1.85 | .52 | 2.14 | .0335 |
| Unresolved conflict | 3.13 | .92 | 3.45 | .85 | 2.47 | .0145 |
| Empathy | 2.51 | .73 | 2.20 | .66 | 3.07 | .0024 |
| Global health/pathology | 4.84 | 1.71 | 3.91 | 1.46 | 3.98 | .0001 |

For all of the remaining ten Family Competence scales and the global family health/pathology scale, t-tests indicated small but statistically significant differences between mean ratings for neglect and control samples. In each case, the analysis favored the control families (see Table 3).

On the average the 91 neglectful families, when compared with the 95 control, families were rated as demonstrating more marked dominance in family leadership; less psychological closeness/cohesion; poorer negotiating skills; more vagueness in verbal expression; less

willingness to assume responsibility for their actions; less responsiveness to other family members' statements; less warmth; being more handicapped by unresolved conflict; and showing less empathy toward one another. On the global health/pathology scale, the control families were judged to average a significantly healthier level of family functioning.

The differences between neglectful and control families' means on the measures were statistically significant, but not large. The differences in means for both groups on the 10 competence subscales were small, and the means for both groups were generally at or near the mid-point, thus indicating neither extremely healthy nor extremely poor functioning. The standard deviations were larger for the neglect families, thus indicating rather substantial variation among the neglectful families on the ratings on these measures of family functioning. This was confirmed by plots of the scores for neglect and control families.

The plots reveal large variations on the Beavers Competence Scales. For instance, on the overt power subscale, for the neglect families 27% were rated as chaotic, leaderless; 28% as markedly dominant (autocratic), and 45% were rated as moderately dominant to egalitarian in their leadership (See Table 4).

Similarly, on the closeness scale, 29% of the neglect families were rated as relatively amorphous, with indistinct boundaries among family members; 35% were scored as isolated, and 36% were rated as close with distinct boundaries among family members. There were also differences among control families, but the distribution was less wide, and always skewed toward the healthy end of the scales. (See Table 5).

**TABLE 4**
**DISTRIBUTIONS OF RATINGS OF FAMILY FUNCTIONING ON BEAVERS OVERT POWER SUBSCALE**

| | NEGLECT (N = 91) | | CONTROL (N = 95) | |
|---|---|---|---|---|
| | N | % | N | % |
| 1 - 1.5 Chaotic/Leaderless | 24 | 27 | 6 | 6.3 |
| 2 - 3 Marked Dominance | 25 | 28 | 19 | 20 |
| 3.5 - 5 Democratic/Equalitarian | 42 | 45 | 70 | 74 |

Chi Square = 33.4, D.F. = 8, P = < .0001

**Table 5**
**DISTRIBUTION OF FAMILY FUNCTIONING RATINGS ON CLOSENESS/BOUNDARIES SUBSCALE FROM BEAVERS FAMILY COMPETENCE SCALE**

| | NEGLECT N = 91 | | CONTROL N = 95 | |
|---|---|---|---|---|
| CLOSENESS | N | % | N | % |
| 1 to 2 Amorphous, Indistinct boundaries among family members | 26 | 29 | 11 | 12 |
| 2.5 to 3.5 Isolation/Distancing | 32 | 35 | 20 | 21 |
| 4 to 5 Closeness with distinct boundaries | 33 | 36 | 64 | 67 |

Chi Square = 26.1, DF = 7, P = .0001

On the Beavers Family Style scales there was a significant neglect-control difference on only one scale. Neglectful families were rated as attending less to members' dependency needs (neglect mean = 3.17, SD = .91 vs. 3.47, SD = .79; t = 2.36; P = .02). The mean ratings of the neglect and control families on the other six style scales and the global style scale were close to the midpoint of each of the scales, indicating a balance between independent, internally-oriented (centripetal) family functioning, and externally-oriented (centrifugal) functioning that one might expect of neglectful families.

Georgia Family Q-Sort

The Q-Sort also revealed significant differences between the neglect Families from the control families on five of the eight clusters/dimensions of family functioning (see Table 6). In the videotaped family interaction, the control families were on the average rated more organized, less chaotic, more verbal and showed more positive affect, while the neglect families displayed more negative affect. Again, as in the Beavers Family Competence ratings, the differences in mean ratings of neglect and control families are not large and the standard deviations indicate moderately large variations within the two samples. Variations are greater for the neglect than for the control sample, especially on the Chaotic cluster.

Table 6
Family Q-Sort Cluster Scores for
Neglect from Control Families

| | Neglect (N = 92) | | Control (N = 92) | | | |
|---|---|---|---|---|---|---|
| Cluster | Mean | S.D. | Mean | S.D. | t | p |
| 1. Positive Affect | 6.61 | 1.36 | 7.03 | 1.12 | 2.28 | .023 |
| 2. Reserved | 4.09 | 1.59 | 3.90 | 1.53 | 0.6529 | .514 |
| 3. Tense | 4.28 | 1.33 | 4.29 | 1.36 | 0.1166 | .907 |
| 4. Negative Affect | 4.63 | 1.54 | 4.17 | 1.27 | 2.24 | .026 |
| 5. Organized | 6.09 | 1.68 | 6.87 | 1.25 | 3.59 | .000 |
| 6. Chaotic | 4.78 | 2.29 | 3.51 | 1.68 | 4.33 | .000 |
| 7. Negotiation | 5.55 | 1.49 | 5.82 | 1.29 | 1.44 | .151 |
| 8. Verbal | 5.86 | 1.44 | 6.34 | 1.23 | 2.46 | .014 |

## IMPLICATIONS FOR INTERVENTION

The measured differences on specific dimensions of functioning suggest first, that assessments of neglectful families include careful assessment of individual differences on key dimensions of family functioning. The results would indicate that assessment of how power and leadership is exercised each neglectful family and how well organized the family appears to be are dimensions that have a significant effect upon the quality of parenting. Assessment of family cohesion, closeness and the internal psychological boundaries between family members is also a critical dimension that influences quality of parenting.

On the Overt Power scale of the Beavers Family Competence Scale 27% of neglectful families were rated as chaotic/leaderless. These families were also tended to be amorphous, with indistinct family boundaries, less efficient in goal-directed negotiation, had more unresolved conflict, were less expressive of thoughts and feelings (see Figure 1). For this group of families, interventions should include the following:

1. Helping the parent to identify, clarify, and consistently reinforce some basic family rules;

2. Providing positive reinforcements to the primary parent for efforts to set reasonable rules, exercise non-abusive discipline to consistently reinforce rules; Reinforce adult-parental prerogatives, differences in expectations for adults, and children in different age groups.

3. Teaching problem-solving techniques to the primary parent, children, and family as a whole;

4. Teaching parents to identify and express own feelings;

5. Teach parents age-appropriate expectations for children;

6. Teach anger management and non-aggressive conflict resolution, e.g. Dreikurs - No lose conflict resolution.

7. Model, instruct, coach positive verbal and non-verbal communication skills, and reinforcement of positive, functional behaviors;

8. Model, teach effective child management, discipline techniques like choice and consequences, time out, positive reinforcement

9. Highlight, reinforce strengths, positive efforts of parents; empower by mutual, reasonable goal-setting, teaching and reinforcing assertiveness; use constructivist techniques; communicate empathy, acceptance of negative as well as positive feelings.

**FIGURE 1**
**CHAOTIC, LEADERLESS ON**
**POWER/LEADERSHIP DIMENSION**
**(27% OF NEGLECT FAMILIES)**

| | CHARACTERISTICS | INTERVENTION |
|---|---|---|
| 1. | Amorphous, indistinct boundaries between family members; More disorganized | Help family to establish rules; Reinforce parental exercise of discipline, prerogatives; Stress age-appropriate expectations of children |
| 2. | Less efficient in goal-directed negotiation, problem solving; More confused about how to proceed on a task; Less able to complete tasks | Teach problem solving |
| 3. | Unclear expression of thought, feelings | Help to identify, express, own feelings |
| 4. | Inconsistent empathy | Help to identify appropriately response to feelings of children. |
| 5. | More unresolved conflict | |
| 6. | More negative affect | Teach anger management, non-aggressive conflict resolution |
| 7. | More likely for child to be in control | Teach positive communication and reinforcement of positive behavior. |
| 8. | Depressed or cynical mood and tone | Teach effective child management skills; reinforce, support parents' adult role-taking; challenge inappropriate expectations of children. Highlight, reinforce strengths, set limited, achievable goals; provide success experiences; clinical treatment of depression? |

On the other hand the leadership in 28% of the neglectful families was rated as "marked dominance" or autocratic. These families also were rated as more isolated, disengaged, somewhat vague in their expression of feelings, with much unresolved family conflict, inconsistently empathic, expressive of a wide variety of feelings, and sometimes warm or polite, but without impressive expression of warmth or affection. Interventions with these families should be include the following (Figure 2):

**FIGURE 2**
**MARKED DOMINANCE/AUTOCRATIC (28%)**

| | CHARACTERISTICS | INTERVENTIONS |
|---|---|---|
| 1. | Leadership varies between laissez-faire and autocratic | Teach democratic leadership skills; Teach "Choices and Consequences" child management skills; Use of Family meetings. |
| 2. | More isolation, distancing between family members | Teach parents to play with, enjoy children; teach mother-child interaction/infant stimulation skills. |
| 3. | Fair problem solving, negotiation skills | Teach, reinforce efforts at problem solving |
| 4. | Somewhat vague, hidden expression of feelings | Teach to identify, own, and express feelings. |
| 5. | Only moderately open to expressions of thoughts, feelings by others | Teach listening, empathic skills. |
| 6. | Generally, direct expression of wide range of feelings | Reinforce verbal expressions of feelings. |
| 7. | Much unresolved conflict, impairs family functioning | Teach non-aggressive conflict resolution. |
| 8. | Absence of, or inconsistent empathy | Teach, first to identify own feelings, then feelings of children, others |
| 9. | Sometimes warm or polite, without impressive warmth and affection. | Model, encourage open expression of affection, positive feelings |

1. Model, teach parent, reinforce democratic leadership skills;Teach "choices and consequences" child management skills, use of Dreikurs' "Family Council" meetings for problem-solving, task allocation;

2. Model, coach, instruct, give permission to parents in how to play with and enjoy their children. Teach games, arts and crafts, and parent-child interaction-stimulation skills with infants.

3. Empower parent by recognizing strengths, constructivist approaches, reinforcing efforts to be empathic, include children in problem solving.

4. Teach age-appropriate expectations for children, challenge unrealistic expectations, reinforce age-appropriate expectations and task assignment, and non-abusive discipline efforts.

5. Communicate empathy, model, encourage, teach parents and children to identify and appropriately express their own feelings;

6. Model, teach, coach empathic listening skills;

7. Model, coach, encourage, reinforce positive verbal and non-verbal expressions of feelings;

For the majority (45%) of neglectful families who were rated as more democratic to egalitarian in their leadership interventions should be directed toward reinforcing their healthy family leadership, communication, cohesion, problem solving and conflict resolution. Constructivist and family empowerment approaches which identify, emphasize, and reinforce family strengths and healthy aspects of family functioning should be stressed. Interventions should include: reinforcement of age-appropriate rules and expectations of children, mutual

problem-solving, family cohesiveness, but with clear boundaries, differential expectations of adults and children, verbal and non-verbal expressions of positive feelings, appropriate responses of family members to communications from other family members, individual acceptance of responsibility for behavior.

On the self-report measure of family functioning neglectful families reported themselves as having significantly more conflict and less expressive of feelings than the non-neglectful families. This further supports the need for teaching neglectful families conflict resolution skills and communication skills.

Race Effects

The differences between neglect and control families on the family measures is further specified by race effects. The total sample was two-thirds African-American, with two Hispanic families: one neglect and one control. The Hispanics were excluded from this analysis for race effects.

There were significant main effects for race on the Beavers Self-Report Family Inventory (SFI), for the total sample (neglect + control) on the family health , family conflict, family cohesion, and family leadership dimensions, and on global family style dimension. Whites reported their families to be less healthy/competent, more conflicted, less cohesive, less well led, more independent & externally focused than did the African-American families. (See Table 7)

Table 7
Differences in Means of Self-Reported Family Functioning by
White and African-American Primary Care Providers in N = 202 Neglect and Control Families

| | Black (N = 131) | | White (n = 71) | | | |
|---|---|---|---|---|---|---|
| SRFI Dimensions | Mean | S.D. | Mean | S.D. | F | P |
| Health/Comp | 1.86 | .60 | 2.10 | .62 | 7.44 | .007 |
| Conflict | 2.05 | .61 | 2.30 | .75 | 7.13 | .008 |
| Cohesion | 2.10 | .74 | 2.27 | .76 | 5.69 | .018 |
| Leadership | 1.67 | .81 | 2.51 | .81 | 25.8 | .001 |
| Expressiveness | 1.86 | .78 | 2.08 | .85 | .10 | .75 |

In the neglect sample alone, (N = 100) the neglectful White primary care providers rated their families as less healthy/competent, having more unresolved conflict, and less well led than did the African-American care providers. They did not rate their families as less cohesive or less expressive than did the neglectful African-American care providers. (See Table 8)

Table 8
Differences Between African-American and White Neglect Families On
SFI Dimensions of Family Functioning

| | Black (n = 65) | | White (N = 35) | | | |
|---|---|---|---|---|---|---|
| SFI DIMENSIONS | Mean | S.D. | Mean | S.D. | t | P |
| Health | 1.87 | .55 | 2.28 | .74 | 3.31 | .001 |
| Conflict | 2.11 | .67 | 2.55 | .93 | 3.21 | .002 |
| Cohesion | 2.10 | .74 | 2.28 | .76 | 1.24 | .21 |
| Leadership | 1.67 | .81 | 2.50 | .81 | 5.16 | .0001 |
| Expressiveness | 1.86 | .78 | 2.08 | .85 | 1.34 | .18 |

Analysis of variance indicated significant interaction effects of race with neglect/control on family health/competence ($F = 3.84$, $p = .05$) and family leadership ($F = 4.96$, $p = .03$). Interaction effects were close to significant for the self-reported family conflict dimension ($F = 3.55$, $p = .06$). The differences between African-American and White families on the family health and family conflict dimensions were significant for the neglect families, but not for the controls. There were significant differences between the White neglect and control families on these two measures ($t = -3.47$, $p = .0006$ for the health dimension and $t = -4.15$, $p = .0001$ for family conflict) , but not for the African-American families. On the family cohesion dimension, differences between African-Americans and Whites were significant for controls but not for neglect families. On the family leadership dimension, differences were much greater for neglect than for control families; White neglect families rated themselves as having significantly less leadership than White neglect and African-American neglect or control families (see Table 9).

Table 9
Mean Scores and Interaction Effects for Race and Neglect/Control on Self-Report Family Inventory

| | Black N = 131 | | White N = 71 | | F | P |
|---|---|---|---|---|---|---|
| | Neglect | Control | Neglect | Control | | |
| Family Health/Competence | 1.87 | 1.85 | 2.28 | 1.92 | 3.84 | <.05 |
| Family Leadership | 1.67 | 1.66 | 2.50 | 1.99 | 4.96 | <.03 |
| Family Conflict | 2.11 | 1.98 | 2.55 | 2.07 | 3.55 | <.06 |

Caseworker ratings of the families' functioning indicated significant differences between the African-American and White families only among the neglect families and only on the leadership dimension of the Family Evaluation Measure (Means: White 3.28 vs. Black 2.84, t =2.49, p = .01). The caseworkers rated neglectful White families as less well led than the White controls or than the African-American neglect and control families, thus supporting the families self-reports of their own functioning.

Beavers Family Competence and Style Rating Scales

Ratings of videotaped in-home family interactions revealed no significant main effects for race on any of the subscales or on either the global health or style scales. There was a significant interaction effect for race by neglect/control on only one subscale of the Beavers Competence Scale - Mood and tone (F = 4.14, p =.044). On this subscale the Black-White difference was significant for the neglect families ( t = 2.76, p = .006) but not for the control families. The mood in the White neglect families was rated as less warm, affectionate and more hostile than in the White control families, or the African-American neglect and control families.

Georgia Family Q-Sort

The only significant differences between African-American and White families found from ratings of videotaped family interactions using the Georgia Family Q-Sort ratings were on two of the eight clusters. Positive affect was rated slightly more salient of the African-American families (Mean = 6.96, SD =1.26) than for the White families (Mean = 6.56, SD = 1.22; t= -2.11, df = 185, p = .04). On the other hand more chaotic functioning was rated more salient for the African-American families (Mean = 4.40, SD =2.15) than for the White families (Mean =3.61, SD = 1.91, t =-2.42, df = 185, p = .02).

In general, the African-American neglect families reported their families as healthier/more competent than did the White neglect families. This may be a reporting bias related to the fact that most of the interviewers in this study were White. Or it may indicate that neglectful African-American families view themselves more positively than the White neglect families, and thus a strength to be built upon. It may also simply indicate a need to use denial in the face of a predominantly white service system that has labeled them as "dysfunctional families". Their greater health is, however, supported by ratings of caseworkers and blind raters of the videotapes.

## IMPLICATIONS FOR INTERVENTION

The family measures indicate significant differences between neglectful and non-neglectful low SES families on the measures of family functioning. However, there are large variations among the neglectful families on the family measures. On the self-report measure of family functioning neglectful families reported themselves as having significantly more conflict and less expressive of feelings than the non-neglectful families. But the differences were most evident in the White neglect families. White neglect families rated themselves as having significantly less leadership than controls and less than African-American neglect or controls. The primary care providers in the White families reported their families to be significantly less healthy/competent, less well led, and having more unresolved conflict than the African-American families. African-American neglectful and control families reported themselves as healthier, more competent than did the White families.

This finding could be interpreted as some reporting bias on the part of the African-American families, but it is supported by the caseworker ratings of stronger leadership in the African-American neglect families and the videotape ratings which indicated that the African-American families demonstrate more positive communication and positive affect. The differences in the self reports may also reflect: (a) more positive self-perception by African-American families, or (b) differences in the norms that African-American families use to assess their own functioning.

Hampson, Beavers and Hulgus (1990) concluded from a comparative study of ethnic differences using the Beavers rating scales that differences in family interactions and style may reflect a tendency of White, middle class families to label interactions as "unhealthy" what might be considered normative for Black and Hispanic families. However, contrary to the findings of the current study, the former revealed that Black families were less able to express thoughts and feelings clearly and directly, and were less receptive, responsive to interruptions or personal statements made by other family members.

SUMMARY OF IMPLICATIONS

The implications for intervention from the current study are:

1. Assessments of neglectful families should include careful assessment of differences on key dimensions of family functioning, especially on how power and leadership are exercised in the family and how the family is organized. The amount of psychological closeness, cohesion, and internal psychological boundaries between family members is also an important dimension.

2. This study suggests that depressed feelings are a significant problem among neglectful families. Principal care provers in the White families were more likely to be depressed than the

African-Americans. Regression analysis to be reported elsewhere indicates that depression and the relationship abilities of the principal care provider significantly influence the adequacy of parenting, independent of the dimensions of family functioning. Assessment of depression and its effects upon family functioning in neglectful families is indicated. Appropriate treatment for depression should be part of treatment plans.

3. White neglectful families are especially in need of family interventions to improve family interactions. Interventions with the White neglect families should focus upon enhancing parental leadership, teaching non-violent conflict resolution, and modeling, coaching the verbal and non-verbal expression of positive feelings.

4. Attention should be paid to differences in normative models or "Healthy/competent" family functioning among different ethnic groups. Interventions with African-American families should support the strengths in those families, rather than to impose white, middle class models which emphasize organization, minimal conflict, clearly differentiated roles, and completely open communication.

Caseworkers, family therapists, and other professional helpers must develop awareness of their own biases about normative or healthy family functioning and develop sensitivity to other normative models among African-American, Hispanic, and other minority groups.

## REFERENCES

Aragona, J.A., & Eyberg. S.M. (1981). Neglected children: Mother's report of child behavior problems and observed verbal behavior. Child Development, 52, 596-602.

Beavers, W.R., Hampson, R.B. & Hulgus, Y.F. (1985). Commentary: The Beavers systems approach to family assessment. Family Process, 24, 398-405.

Beavers, W.R., Hulgus, Y.F., & Hampson, R.B. (1988). Beavers system model of family functioning: Family competence and family style evaluation manual. Dallas, TX: University of Teaxas Health Science Center.

Bousha, D.M. & Twentyman, C.T. (1984). Mother-child interactional style in abuse, neglect, and control groups: Naturalistic Observations in the home. Journal of Abnormal Psychology, 93, 106-114.

Burgess, R.L. & Conger, R. (1978). Family interactions in abusive, neglect, and normal families. Child Development, 49, 1163-1173.

Gaudin, J.M. (1990). Remedying child neglect: Effectiveness of Social Networks Interventions Journal of Applied Social Sciences, 15, 97-123.

Gaudin, J.M., Polansky, N.A., & Kilpatrick, A.C., (In Press). Relationships among loneliness, depression, stress, and social supports in neglectful families. American Journal of Orthospsychiatry.

Hampson, R.B., Beavers, W.R., and Hulgus, Y. (1990), Cross-Ethnic differences: Interactional assessment of white, black, and Mexican-American Families. Journal of Marital and Family Therapy. 16, 307-319.

Herrenkohl, R.C., Herrenkohl, E.C., & Egolf, B.P. (1983). Circumstances surrounding the occurrence of child maltreatment. Journal of Consulting and Clinical Psychology, 51, 424-431.

Hines, P.M. & Boyd-Franklin, N. (1982). Black families, In M. McGoldrick, J.K. Pearce & J. Giordano, Ethnicity and Family Therapy. New York: Guilford.

Hudson, W.W. (1982). The clinical measurement package: A field manual. Homewood, Ill.: Dorsey Press.

Hudson, W.W. & Proctor, E.K. (1977). Assessment of depressive affect in clinical practice. Journal of Counseling and Clinical Psychology, 45, 1206-07.

Magura, S., & Moses, B.S. (1986). Outcome measures for child welfare services: Theory and applications. Washington, D.C.: Child Welfare League of America, Inc.

Minuchin, S., Montalvo, B., Guerney, B.G., Rosman, B.L. & Schumer, F., (1962), Families of the Slums. New York: Basic Books.

Polansky, N.A., Chalmers, M.A., Buttenweiser, E. & Williams, D.P. (1981). Damaged Parents: Anatomy of child neglect. Chicago: University of Chicago Press.

Polansky, N.A., Gaudin, J.M., Ammons, P.W. and Davis, K.B., (1985). The psychological ecology of the neglectful mother. Child Abuse and Neglect. 9, 265-275.

Russell, D., Peplau, L.A., & Cutrona, C.B. (1980). The revised loneliness scale: Concurrent discriminate validity evidence. Journal of Personality and Social Psychology, 39, 472-80.

Wampler, K.S., Halverson, C.F., Jr., Moore, J.J., & Watson, C. (1989). The Georgia Family Q-Sort Manual. Lubbock, Texas: Department of Human Development and Family Studies. Texas Tech University (unpublished).

Winer, B.J. (1972) Statistical Principles in Experimental Design, 2nd Edition. New York: McGraill, especially pp. 283-299.